DECLARATION 1.1151F AND POWER OF ATTORNEY

U.S.A.

1	FOR ATTORNEYS USE ONLY AND LONG.
١	ATTORNEYS' DOCKET NO.
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ALL PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION; NON PRIORITY; OR PROVISIONAL APPLICATIONS

1 0	As a below named inventor, I declare that my residence, post office address and citizenship are stated below next to my name, the information given herein is true, that I believe that I am the original, first and sole inventor (if only one name is listed at 201 below), or an original, first and joint inventor (if plural inventors are named below at 201-203, or on additional sheets attached hereto) of the subject matter which is claimed and for which patent is sought on the invention entitled: Use of Urodilatin for Treating Chronic Renal Insufficiency with								
	Residual Re	dilatin i	or Treati	ng Chronic Re	enal Insui	ficiency	with		
102		enar runc	ETOH	DOE /ED A	0 /10 4 6 0				
	which is described and claim		PCT International Applic	ation No. PCT/EP 0	0/10462	filed	<u>October</u>		
	the attached specification	n 📙	the specification in appl	ication Serial No.		filed			
			(if applicable) and am	ended on					
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose Information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I hereby claim foreign prionity benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: Priority Claimed								
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	199 31 4/1 (Number)	• 4	Germany (Country)		26 OCCODE	1 1999	Yes No		
	(110111001)		(Octimy)	'	Daymonas rear : sea,		Te3 NO		
	(Number)		(Country)		Day/Month/Year Filed)				
ြာ	(Number)		(Country)	(Day/Month/ rear Filed)		Yes No		
103									
Н	(Number)		(Country)	(Day/Month/Year Filed)	-	Yes No		
5	I hereby claim the benefit un	ider Title 35 United Sta	ates Code \$119(e) of any	United States provisional applica	tion(s) listed helow				
티티	Application No.						EW - B. C.		
님				Арр			Filing Date		
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this addisclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information application in Title 37, Code of Federal Regulations, §1.56 which became available between the filling date of the prior application and the national or PCT international application:							which is m	naterial to	
	(Application Se	enal No.)		(Filing Date)		(Status: patented, p	pending, abandoned)		
PO	WER OF ATTORNEY: As	a named inventor.	Thereby appoint the fo	ollowing attorneys (Registration	nn No.) to prosecute	this application, rec	eive and act on ins	tructions	from my
age	nt, and transact all busine:	ss in the Patent and	Trademark Office co	nnected therewith. HARVEY	B. JACOBSON, JR.	(20,851); JOHN CI	ARKE HOLMAN (22,769); 1	MARVIŃ
				SKY (26,421); JONATHAN L.	SCHERER (29,851);	IRWIN M. AISENB	ERG (19,007); WIL	LIAM E. F	PLAYER
(31,	409); YOON S. HAM (45,3	307) and NATHANII	EL A. HUMPHRIES (2	22,172)					
	SEND CORRESPO	NDENCE TO: CL	JSTOMER NO. 0013	3		PHONE CALLS TO			
1	or (please use Attorney's					use Attorney's Do	cket No.) (202) 63	8-6666	ļ
	<u>JACOBSON HOLM</u> AN				IACODEON HOLMAN				
1			LIMITED LIABILITY					ŀ	
1			VENTH STREET, N.V		PROFESSIONAL LIMITED LIABILITY COMPANY				
L		i A	macron, carrayy						
*Inv	entor(s) name must includ	le at least one unab	breviated first or mide	dle name.					
	FULL NAME * FAMILY NAME			GIVEN NAME	GIVEN NAME MID		DDLE NAME		
	OF INVENTOR FOR	SSMANN		_Wolf-Georg					
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H	FULL NAME * FAMILY			GIVEN NAME		MIDDLE		3002	
	FINVENTOR FORSSMANN			Kristin				į.	
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l fur	ther declare that all statem	ents made herein o	f my own knowledge a	re true and that all statements	made on information	and belief are belie	eved to be true; and	further th	nat these
				and the like so made are pun			under section 100	1 of Title	18 of the
Uni	ieu siales Code; and that	such willful false st	atements may jeopard	dize the validity of the applica	uon or any patent iss	ung mereon.	011		
SIGNATURE OF INVENTOR 201. SIGNATURE OF INVENTOR 202: SIGNATURE OF INVENTOR 203.									
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SIC	SNATURE OF INVENTOR	201.	SIGNATUR	E OF INVENTOR 202	Sic	NATURE OF NV	ENT OR 203'		
	M	h. 1/1						<u> </u>	
L	SNATURE OF INVENTOR	h. 1/1	SIGNATUR DATE:	e of INVENTOR 2022		TE 2	T. Feh.	200	2

JACOBSON, PRICE, HOLMAN & STERN ADDITIONAL INVENTORS

* Inventor(s) name must include at least one unabbreviated first or middle name

FULL NAME * OF INVENTOR FAMILY NAME MEYER GIVEN NAME MIDDLE NAME Markus STATE OR FOREIGN COUNTRY RESIDENCE & COUNTRY OF CITIZENSHIP Germany Hannover, Germany post office address Dorfmarkhof POST OFFICE слу <u>Hannov</u>er STATE OR COUNTRY Germany 20625 28 FAMILY NAME FULL NAME ' GIVEN NAME MIDDLE NAME OF INVENTOR RESIDENCE & CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP POST OFFICE POST OFFICE ADDRESS STATE OR COUNTRY ZIP CODE ADDRESS FULL NAME * FAMILY NAME GIVEN NAME MIDDLE NAME OF INVENTOR RESIDENCE & CITY 206 STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY STATE OR COUNTRY ZIP CODE ADDRESS FULL NAME *
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I further declare that all statements made nerein of my own knowledge are true and that all statements made on information and belief are to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are purishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may peopardize the validity of the application or any patent issuing these

Code; and that such willful false statements may je	copardize the validity of the application or any patent issuing	thereon.		
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205*	SIGNATURE OF INVENTOR 206*		
DATE, 28/02/0 L	DATE	DATE		
SIGNATURE OF INVENTOR 207*	SIGNATURE OF INVENTOR 208*	SIGNATURE OF INVENTOR 209*		
DATE	DATE	DATE		
SIGNATURE OF INVENTOR 210*	SIGNATURE OF INVENTOR 211*			
DATE	DATE			

☐ Additional inventors are named on separately numbered sheets attached hereto OJPH&S 1995 8/95 (COPYING WITHOUT DELETIONS PERMITTED)